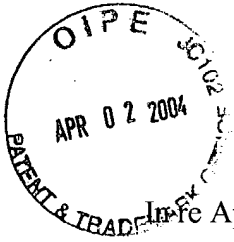


PATENT APPLICATION



Inre Application of:

Examiner: A. Tabatabai

Group Art Unit: 2625

March 30, 2004

March 30, 2004

RECEIVED

APR 07 2004

Technology Center 2600

PRELIMINARY AMENDMENT

Prior to further examination of the above-identified application for which a

follows:

March 30, 2004

(Date of Deposit)

Michael K. O'Neill

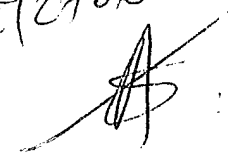
180.00 OP
172.00 OP

(Name of Attorney for Applicant)

Signature _____

March 30, 2004
Date of Signature

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RCE/2700


In re Application of:

Docket No. 03500.014971

TSUKASA SAKO

Application No.: 09/729,346

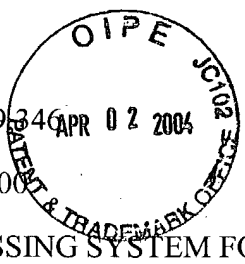
Examiner: A. Tabatabai

Filed: December 5, 2000

Group Art Unit: 2625

For: IMAGE PROCESSING SYSTEM FOR
 PROCESSING PHOTOGRAPHING IMAGES

Date: March 30, 2004



Mail Stop RCE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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Sir:

Technology Center 2600

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 36	MINUS	** 26	= 10	x \$9 \$18	180.00
INDEP. CLAIMS	* 6	MINUS	*** 4	= 2	x \$43 \$86	172.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$352.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 352.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- ☒ A check in the amount of \$ 770.00 to cover the Request For Continued Examination (RCE) fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant

Registration No. 32622

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

Form #120

CA_MAIN 79059v1

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